



Advocacy Group for the Environmentally Sensitive
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A G E S

ADVOCACY GROUP FOR THE ENVIRONMENTALLY SENSITIVE

AIMS

This group, founded in 1985 by a group of environmentally ill patients of Southern Ontario, have many aims for the major welfare of the hypersensitive.

1. The first urgent aim is to group the environmentally ill to assure them comprehension, acceptance, mutual needs attendance, friendship, as well as immediate assistance when necessary.
2. The members need a group to act as advocate for them in attending urgent needs, such as pensions, welfare, insurance, disability benefits, workmen's compensation and OHIP.
3. Education and resources are highly attended to by the guests, newsletter, publications, printouts, library and tape exchanges.
4. The support group of the family members who are not ill is to educate and help the relatives, medical doctors, friends at large, to understand, accept, advise and counsel those living in close relationship of the environmentally ill.

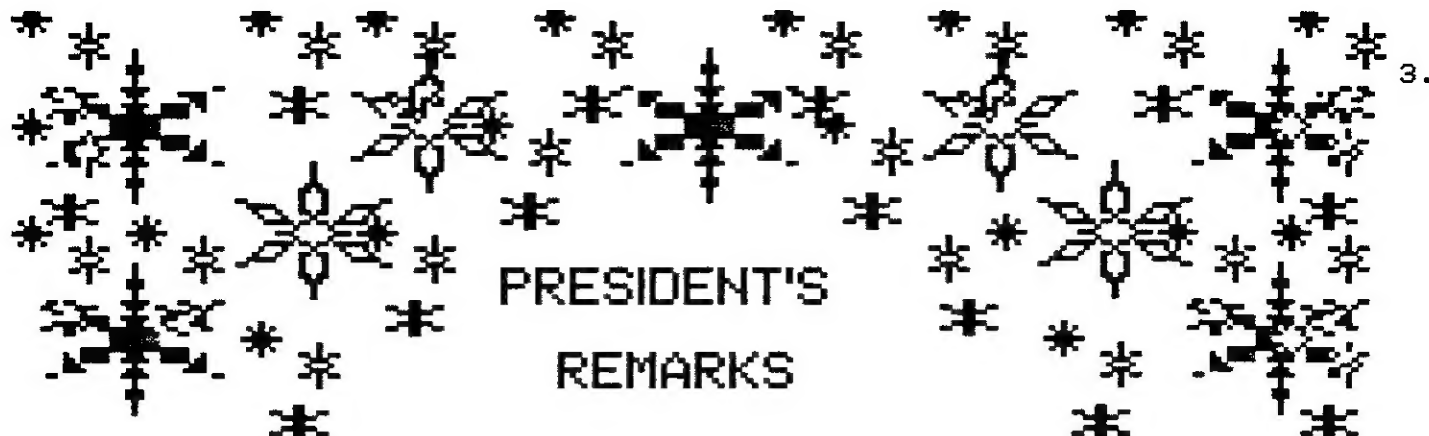
A.G.E.S. membership includes 4 publications of A.G.E.S. Magazine. Annual membership and subscription fee is \$15.00 (regular), \$20.00 (Professionals & Associations), \$5.00 on Disability Pension or Social Assistance

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A.G.E.S. is a Canadian Incorporated Non Profit Self Help Group.

Do not hesitate to send articles

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Dear Members and Friends,

As the incoming president (protem) experiencing like many of you an environmental illness, I recognize the advances A.G.E.S. has made in our short time of existence.

A Constitution and Incorporation carries with it many hidden values. This brings us into contact with coalition groups who share mutual interests.

I request your backing and would appreciate your support in taking an active role in implementing A.G.E.S.'s aims and objectives at forming new area chapters.

I wish to offer my personal thanks and yours to our Founder and past President, Mrs. Marie Laurin, who steered this group so well for the last two years. I wish her a renewed health on her path to wellness. May we all grow from her sense of devotion to our cause.

Continue to inform us of your personal needs in writing. Keep the articles coming for our newsletter and be ready to serve on your Board of Governors.

Yours devoted,

Ruth E. Ferguson Mead, B. Sc.
National President, protem
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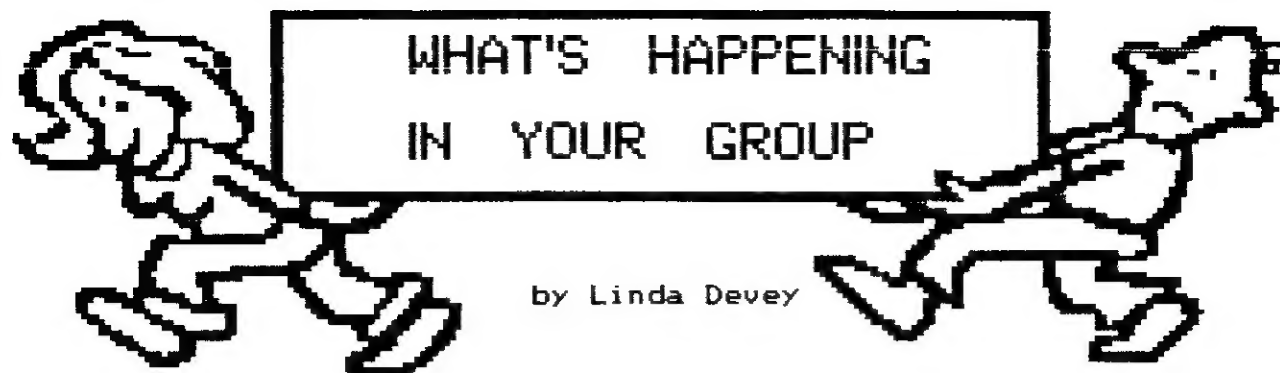
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in Hamilton



Keep for
further reference



December 14: Mr. Gary Alward, a Social Worker at Henderson Hospital in Hamilton, was our guest speaker. Our members found his discussion on counselling for the Environmentally Sensitive and family counselling very helpful. We are looking forward to meeting Gary again in the near future.

January 13: S.E.A.C. - Public - Linda Devey updated the Special Education Advisory Committee, on progress made to date in the discussions concerning the needs of allergic and hypersensitive students and teachers.

January 28: S.E.A.C. - Catholic - presented their special guest speaker 'Marilyn Ramsy' - Director of Education for Centre East in Toronto.

January 28: Donna Powell very successfully presented a brief written by Marie Laurin and Ruth Mead, to the Social Services Review Committee hearing in Hamilton. The brief outlined the special needs of our members and changes needed in Social Services policy re-housing, pensions, family benefits, drugs, etc..

January 30: Linda Devey, Donna Powell and Heather Holden presented two workshops to Halton Public Teachers entitled "Coping with Allergic and Hypersensitive Students".

Assistance was given to members at large throughout the province re: family benefits, discussions with lawyers, housing search and Canada Pensions.

Treatment at Philpott Medical Centre

by Marie Laurin

While visiting Florida in order to detoxify and gain some strength, at Christmas, my condition deteriorated and I became unwell. We drove to North Redington Beach as airlines did not allow a portable oxygen tank on board - it is considered a projectile.

On the way, I could feel my back problems slowly diminish. At this point, I associated their cause with my home area in Ontario. After two days, I could feel my skin softening and shedding it's crust. I was fortunate enough to find restaurants where I could tolerate some seafood and tried an unknown fish (scrod) that agreed with me.

I will not attempt to describe all my accommodation problems in the various motels along the way. Even with my air cleaner and water purifier, the chemicals in the air freshener, carpet and polish were too much to bear at times.

After five days, I realized that my bladder was not functioning well and I obviously had an infection. In acute pain, I did not know where to turn for help. My previous stay in Avon Park Florida Hospital two years previously was definitely not the proper place for treatment. Finally I thought of Dr. William Philpott, physician, psychiatrist and well known author. Fortunately on December 30, 1986, I was able to consult with him about my problems. I stayed nine days as an outpatient at the Philpott Medical Center in St. Petersburg, Florida, which was twenty miles from North Redington Beach. This Clinic is not yet covered by O.H.I.P. that I am aware of. For those who need cost estimates, the group will be pleased to send you a copy of the approximate costs, upon written request - ONLY - but it varies for each patient.

Treatment starts about 8:00 A.M. and finishes about 5:00 - 6:00 P.M. It is a bio-ecologic behavioural diagnosis and treatment center. Dr. Philpott, a physician and psychiatrist has laboratory facilities with a highly trained staff consisting of two lab technicians, 4 - 5 nursing staff, Mrs. Philpott a dietician and nutritionist counsellor, a cook, 5 secretarial and administrative staff persons and other day to day duty personnel, for routine duties.

Dr. Philpott, M.D. will supplement specific amounts of nutrients to determine (research) their possible therapeutic value. Names that have been applied to this nutritional therapy have been characterized under such as specific nutritional therapy; megavitamin nutrient (vitamins, minerals, amino acids, fats) therapy; and/or orthomolecular therapy.

During my stay, I noted there were patients from Norway, Switzerland, New Mexico, Arkansas, New Guinea, Florida, etc. I was the only Canadian being treated, at that time.

Facilities of the Treatment Center Reproduced with the permission of Dr. Philpott.

Philpott Center is a bio-ecologic-behavioral medicine, diagnosis and treatment encompasses:

1. Maladaptive reactions, both immunologic and non-immunologic types.
2. Environmental substances, including foods, chemicals and inhalants and all allergic-type reactions.
3. Nutritionally disordered states assessed by laboratory analysis, as well as empirically applied nutrition.
4. Examination and treatment of genetic errors.
5. Origin and treatment of toxic and marginally toxic (paratoxic) states.
6. Disordered metabolism of vitamins, minerals, amino acids, carbohydrates, fats and proteins.
7. An evaluation of the possible need for education, behavioural retraining and insightful problem solving, and where indicated, implementation of same.

8. Diagnosis of infectious states by culture and antibody studies, and treatment by antibiotics, ozone, saturation therapy, vitamin C and hydrogen peroxide for Candida.
9. Treatment by stock and autogenous vaccines, including bacterial, viral, fungal and rhusall.
10. The need for optimum oxygenation of tissues, achieved by such as 20 tr. exercise, breathing oxygen, oxygen saturation therapy achieved by ozone given as hyperbaric autohemotherapy (O₃ mixed with blood and reinfused) intravenous O₃, intramuscular O₃, O₃ colon insufflation or douche, O₃ water as mouth rinse swallowed, used as local application, O₃ applied to skin lesions, or EDTA chelation.
11. Detoxification by using oxidative enzyme function by use of ozone (O₃) and intravenous vitamin C.
12. Detoxification by vitamin C as a reducing agent, with other vitamins and minerals.

Possible Reactions

Nutritional therapy may produce:

nausea weakness allergic or allergic-like reactions
nutritional imbalance requiring medical supervision

Food withdrawal and provocative food testing may produce:

physical symptoms mental symptoms

EXPECT REACTION ON WITHDRAWAL AND PROVOCATIVE FOOD TESTING!

This is one of the ways we identify your sensitivities! These symptoms may be mental or physical - any symptom the brain or body is capable of producing.

The breadth of metabolic testing and treatment used in his diagnosis and treatment will be considered by some physicians or insurance carriers as not usual and customary, not necessary, not traditional or as research.

Philpott Medical Center
 William H. Philpott, M.D. Director
 6101 Central Avenue
 St. Petersburg, Florida 33710

William H. Philpott, M.D. is a practicing physician and psychiatrist who moved his practice from Oklahoma City, Oklahoma about four years ago, to Tampa Bay area in Florida, where he is associated with Harborside Hospital. Dr. Philpott pioneers in the field of Bio-Ecologic Medicine which specializes in the diagnosis and treatment of environmental and nutritional problems, physical and mental degenerative diseases, metabolic learning and behavioural disorders. He was formerly assistant Medical Director at Fuller Memorial Hospital, South Attleboro, Mass. and on the staff of Taunton State Hospital, Taunton, Mass. He is currently medical director of the Institute for Bio-Ecologic Medicine in St. Petersburg, Florida. He also serves on the editorial board of the Journal of Orthomolecular Psychiatry. He is a

former President of the International Academy of Metabology. Dr. Philpott co-authored the book "Brain Allergies The Psychonutrient Connection" and "Victory over Diabetes" with Dr. Dwight K. Kalita, P.H.D.. He has written widely for newspapers, magazines and professional publications. He is a frequent lecturer and his clinical practice is international in scope.



news release / communiqué

Ministry of Health
Ministère de la Santé

86/nr-296
Contact: Rick Winston, Toronto
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MINISTRY ENCOURAGES RESEARCH STUDIES ON ENVIRONMENTAL HYPERSENSITIVITY

TORONTO, December 19 -- "The Ministry of Health will encourage research proposals for studies on environmental hypersensitivity, a first step in understanding the nature of the disorder and developing effective treatment," Health Minister Murray Elston announced.

Currently, little is known about the nature of the condition called environmental hypersensitivity, which is described as multiple sensitivities to a wide range of foods, chemicals and environmental substances.

"We are encouraging the research community to submit proposals for an epidemiological study on environmental hypersensitivity and for proposals for controlled studies to evaluate the effectiveness of current methods of treating the symptoms," Mr. Elston said. "Epidemiological studies would provide researchers with information to enable them to identify common factors and develop consistent tests or standards for diagnoses. This is the first step in finding a cause for the disorder and developing effective treatment."

An epidemiological study is one that examines the prevalence and spread of disease in a community to determine the links between causes of the illness and the resulting symptoms.

"There may be a debate as to the nature of the illness from which these people are suffering," Mr. Elston said. "But there is no doubt that they suffer disabilities. These studies may clarify the causes of their complaints and lead to more effective management."

The ministry hopes to receive the proposals in time for its annual spring research grants competition. The ministry awards approximately \$5 million annually through research grants programs. Currently, projects on subjects ranging from Acquired Immune Deficiency Syndrome (AIDS) to hypertension control at the worksite are being supported through these programs.

More research was recommended by both the Ad Hoc Committee on Environmental Hypersensitivity, chaired by George W. Thomson, and the subsequent Advisory Panel which examined the Thomson report, convened by the Hospital for Sick Children and chaired by Dr. Barry Zimmerman.

Although clinical ecology is not a recognized field of practice, there are about 15 medical practitioners in the province who specialize in treating symptoms believed to be related to environmental sensitivity.

Both the Thomson Committee, which was established by the ministry in November 1984 and whose report was in December 1985, and the Advisory Panel, whose report was released, concluded that there was not enough information on what constitutes environmental hypersensitivity and indicated more research was necessary to establish the correct medical facts.

If anyone among you know of or is a scientist that could examine the spread of disease in the community to determine the links between causes of the illness and it's symptoms, do not hesitate to write above address.

Proposals should be received by the Ministry of Health for it's Spring Annual Research Grant Competition.

A.G.E.S. will be requesting and recommending their own researcher from the U.S.A.

Conclusion of the Panel:

Reproduced & adapted from R.A.P.E./H. 86.09.

a) Urgent need for well designed fundamental and clinical research studies.

Provide funds for contract research from an existing agency with an established scientific reputation. It should be subject to peer review. The application should be evaluated by a committee of:

Pathologist, Toxicologist/Pharmacologist, Behavioural Scientist (in relation to food), Nutritionist, Immunologist & Allergist, Clinical Epidemiologist, Developmental Biologist, Clinical Ecologist, Neurobiologist.

Funds, provided annually for five (5) years (maximum amount in third year)

In the fifth year, an independent review body could recommend further development.

b) It is premature to act upon the Thomson Report recommending an in-patient facility at this time because it could not function on research grants in only three (3) years time.

c) US Treatment

All patients being considered to be admitted at a U.S. facility should be referred through an assessment process. A lay committee should undertake a statistical evaluation of the costs of such treatment and develop a data base towards cost analysis. An Ethicist, a Lawyer and a Health Economist should be on the committee, as a minimum. Then this lay committee could add a professional component and assume responsibility for recommending referral of the patients. Before this stage, the committee should gather information to evaluate the efficiency and long term result of treatment in an in-patient facility.

d) While research is being done scientifically on the diagnostic testing and treatments recommended by clinical ecologists remains unproven, it would be more appropriate for social agencies to be used to provide support for people who are incapacitated while this research is being done.

Twenty-six pages of the report all are costs of E/H. based on Thomson submissions. These estimates are irrelevant since they were not calculated for this kind of analysis and have been adapted by the two analysts. For further comments of the Panel, write to:

Report of the Advisory Panel on Environmental Hypersensitivity
C/O: Health Minister or your M.P.P.

* CORRECTION: *
* *
* For members who received the food "Source List" - please note that the *
* Vineland Green House of Gerrard van der Loos, the fresh *
* vegetables are growing in hot houses and not through hydroponic growing *
* as advertised. *
* *

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ECOLOGICAL ILLNESS AND UNEMPLOYMENT BENEFITS

EILR has received numerous inquiries from individual with chemically induced illness (E.I.) regarding any options they may have in dealing with employers who refuse to provide healthful workplaces. Of course, workers compensation is one remedy to pursue, as are possible applications of Section 504 of the Federal Rehabilitation Act (where the employer is receiving Federal funds) and State and Federal occupational health requirements. However, where the employer simply refuses to provide a healthful environment, the employee may be faced with the difficult short term choice of quitting the job or risking additional health damage. In such instances, eligibility for unemployment insurance benefits may provide important interim assistance.

Recently, individuals in Illinois and New York reported to EILR on their successes in winning unemployment benefits after quitting their jobs for health reasons. In each case, the employer fought the employee's application for benefits on the basis of "voluntary" leaving of employment or excessive unexcused absences. Initially, both claims were denied, which is similar to the fate facing most E.I. Social Security Disability claimants. However, with these unemployment cases, the problem was generally the dishonesty of the employer, rather than the lack of sufficient medical documentation which was the cause for denial of benefits. Both claimants eventually prevailed at hearings held on their appeals.

In contrast with Social Security officials and workers compensation boards, unemployment compensation agencies generally do not become involved in medical questions. The legal issue in E.I. cases is whether the individual quit (or was absent) at the advice of a physician because exposures at the workplace were likely to cause health damage. Thus, the most critical piece of evidence is a letter from the physician advising the claimant not to return to work.

There remains an important "catch-22" in this area, however. Under the law in most states, an employee can only receive unemployment benefits if ready and able to work and, in fact, must often be actively seeking employment. Thus, the employee may be disqualified from benefits if his or her physician makes categorical statements to the effect that the employee is totally disabled and is unlikely to find a "safe" workplace in their field of work.

Therefore, it is important for the employee and his or her physician to avoid over-generalizing in unemployment compensation cases. There is generally no need to provide detailed descriptions of E.I. and all of its possible future manifestations if the employee does not completely recover immediately. The employee merely needs to establish that the workplace is unhealthful to him or her.

By taking this approach, the employee may gain some "breathing room" during which additional medical evaluations may be pursued and a course of action plotted to find employment in a workplace which poses no major health hazards for this worker.

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INSURANCE

Bad Faith Torts

The December 1982 issue of Trial, published by the Association of Trial Lawyers of America, included two short articles (complete with references) about the tort of insurance bad faith.

Insurance Information Sought

EILR, in cooperation with the Human Ecology Action League (HEAL) is seeking information on incidents where recipients of services by clinical Ecologists are having insurance reimbursement claims denied by their insurers. Attorneys and others willing to share information in this area should write to EILR. Please include permission to release your name to others involved with this issue, or total confidentiality will be presumed. Case citations helpful in this area will be shared with all interested parties.

We have also heard from a couple of ecologically ill persons who state that things were going along fairly well with their insurance companies until they mentioned that they were being treated by "Clinical Ecologists". Please let us know if you have any documentation of such ill will.

Note: At the end of this issue, we have reprinted an item that appeared in the newsletter of the Western New York Allergy and Ecology Association, Buffalo, New York, entitled "Legal Decisions Regarding Health Insurance". This material is not presented as an exhaustive treatise, but merely to give you something to think about. Caution should be exercised in applying any such "advocacy" analysis to your specific case.

LEGAL DECISIONS REGARDING HEALTH INSURANCE

Reprinted with permission from: The Newsletter of the Western New York Allergy & Ecology Association
c/o Ms. Rika Vanderwalt, 437 Linwood Ave., Buffalo, N.Y.
14209. (No. 32, September 1982)

Following are excerpts from various legal decisions that pertain to the correct procedure the Courts have determined insurance companies should follow in the determination of paying claims.

We have deliberately included legal decisions relative to the highly controversial substance known as Laetrile. The courts simply ignore any medicinal substance, including Laetrile, by stating that there is ample hard evidence to indicate that Laetrile works, BUT the issue before the court is that the substance is a drug that any physician may prescribe and the physician alone has the right to determine what prescription should be given, with the insurance company to pay any claim as presented according to the provisions outlined in the insurance contract policy.

Insurance companies use certain key words in denying/rejecting medical claims. We have prepared several pages of legal decisions, many of which have already gone through the Appellate Courts and the United States Supreme Courts, usually against the Insurance Companies.

Generally speaking, the phrases are as follows:

- a) Medical necessity. The Courts hold that the attending or treating physician and the informed patient determine the medical necessity, not the insurance company who attempts through the use of Peer Review to practice medicine without either a licence or a patient.
- b) Laetrile. We deliberately used some of the cases wherein Laetrile has been determined before the Courts to be a drug which a physician may prescribe. The courts have held that no treatment has to be successful or approved by anyone but the prescribing physician or even necessary.
- c) Reasonable expectations is well established in case law. The object and purpose of any insurance is to indemnify the insured for good faith and honest claims submitted by the insured. The law gives full protection to the insured as opposed to insurance companies. Any doubts, ambiguities or uncertainties rising out of any language in the policy must be resolved in favour of the insured. For insurance companies to win any lawsuit wherein they have denied a claim, the policy must state in clear, plain, unmistakable and conspicuous language such limitations, such as This company will not pay for DMSO or Laetrile or Beta blocker or aspirin.
- d) Misrepresentation is self-explanatory.
- e) Exclusions must be conspicuous is also self-explanatory.
- f) Ambiguity/Uncertainty also is self-explanatory.
- g) Bad faith involves the fact that an insured may sue his insurance company for "bad faith" when the contract is breached by the insurance company refusing to pay the claim.
- h) Implied covenant of good faith and fair dealing. Reference is made here that if an insurance company intends to defraud the claimant by rejecting, denying a claim for any reason not specifically spelled out in the contract the exclusion must be exact in its terminology. In law it is presumed that two parties entering into a contract do so "in good faith" and that everything material to the contract must be disclosed to the other party.

The Courts have repeatedly ruled that insurance companies do not have the authority to review or reject the treating physician's medical judgment. See Cob Vs Grant 8 Cal. 3d 229, 104 Cal Rptr 505, and Doe Vs Bolton, U.S. Supreme Court Decision in 739, 410 U.S., or Van Vactor Vs Blue Cross in 50 Ill, App 3d 709, 365 N.E. 2 638, 640.

This establishes the law that no insurance company has the legal right to review any claim form or reject it.

*If the insurance company feels they have a legal right to review the claim, that right MUST be spelled out in the body of the insurance contract, specifically and precisely. In other words, the insurance

company must have printed, "this insurance company shall review and examine all claim forms by our own review committee or division as to medical necessity, appropriate treatment or whatever."

If that statement is not made in the insurance policy itself, or words to that effect, the insurance company is acting in bad faith and can be sued, with the possibility of its charter/licence being revoked by the Insurance Commissioner.

Before the united States Supreme Court right now are two cases that will be decided shortly. The first is McClure Vs Harris, coming from the Appellate Court in Northern California wherein Blue Shield was sued by the Secretary of Health of California that Part B of Medicare is unconstitutional inasmuch as it denies the claimant due process of law according to the U.S. Constitution. Any insurance company that uses their own personnel to act as a Hearing Officer or an Appeal Officer is denying the claimant due process of law.

A companion case is also before the U.S. Supreme Court wherein those insurance companies that use Peer Review (asking other physicians or Medical Societies to review a physician's treatment and medical judgment) are in violation of the U.S. Constitution.

In each instance, the American Bar Association has filed supportive briefs against the insurance companies. In the last case, the Federal Trade Commission has set aside a separate division that is regularly suing insurance companies who are still using peer review.

A dramatic change will come to Medicare this year. This will also involve many insurance companies who are facing lawsuits that are being won daily, involving hundreds of thousands of dollars in punitive damages which the Courts are awarding to claimants who are being denied their contractual rights.

,

SUCCESS — SUCCESS

Ottawa Carleton Housing Authority has now accepted the special needs of one of our Perth members. A rental allowance was awarded for her living expenses to a landlord for residence in a house accommodated for her specific needs.

This landlord (our member) was also successful in receiving a C.M.H.C. renovation grant of \$5000.00.

Our thanks to Mr. Chris Brown of Ottawa for his involvement in this case.

BRAVO : OTTAWA/CARLETON HOUSING AUTHORITY,
you understand our special needs

INSIST ON HAVING YOUR NEEDS RESPECTED AND DEALT WITH. IT'S WORTH THE EFFORT!

- Step 1: Apply for renovation grants - region - C.M.H.C.
- Step 2: Apply for housing geared to income grant if on Family Benefits.
- Step 3: Inform your M.P.P..
- Step 4: Inform your Board of Directors

RE-DEFINING 'NORMAL'

Donna Finocchiaro
Hamilton Member

At my first A.G.E.S. Meeting, a woman asked the guest speaker "Do you find yourself redefining normal?" It was more than a fair question, especially in our select group. My mind clicked into a mode and the context in which that word is often used. A baby is born and it is said, "It is normal because it has five fingers on each hand all it's toes, two arms and legs and a well-rounded head with two eyes of matching color," etc.. I was like that so I asked myself - "Am I abnormal now that food and chemicals seem to be making me ill, or is it my environment that is abnormal?"

My sister, who smokes while I choke, thinks I am out of sync. The world, in our youth, recklessly threw all caution to the wind, as our peers all lit up. Even then I did not fit the "norm", for I refused to smoke. That was forty years ago. I realize now that second-hand smoke was getting into my lungs, that were not getting enough oxygen. I had headaches, school was difficult at times and there were many days of depression. I was in the minority then. Who was/is normal; now that we are fighting for our very lives and smokers are part of the problem, rather than the solution. Feeling like the odd-man out, I watched from the sidelines for many reasons, being poor and fatherless also made me different.

Do you or your children feel that way because of allergic reactions, experienced because of our chemical world? There are many old as well as new schools, filled with hazardous materials, that can affect them. Do other children make them the butt of their jokes? Do the teachers seem uncaring? It is an age-old story, maybe the reasons have changed a little. Perhaps a parent neglected to teach a child there is no "norm" per se. If we led them to believe, in some way it only means the way most of us were born, then what about redefining it for them? Is a model on a Cosmopolitan magazine cover normal or artificially beautiful with chemically based make-up? A health hazard for her world perhaps! Was Terry Fox less than normal as he ran across the country on one leg, but a hero, a giant among men as Steve Fonyo and Rick Hansen. They live with their inadequacies, as we all must. Perhaps the question should be what is real for each of us, limited physically, but mentally we can still be giants. Do not sell yourselves short as we all have problems to overcome; just do not allow yourself to be limited by them.

There are answers. Seek and ye shall find the Bible said. Lend a helping hand to others who might be even more distressed. The mind can only focus on one thing at a time. I have found my problems almost seem non-existent at such times. Forget about the opinion of others. Do the best YOU can for someone else and you in turn will be looked after by another. If your children have been taught not to laugh at those who seem less fortunate in appearance or mentality, their compassion will be returned.

Oh ye of little faith comes to mind. When I was totally depressed and praying for death for eight years, someone cared enough to give me a book - THE -POWER OF POSITIVE THINKING - too ill to concentrate I picked out certain chapters that were applicable. From somewhere, deep down, I slowly grasped that my purpose for being had not been fulfilled and I must plod along one day at a time, as all seven days a week were too much. Gradually the days changed, ever so slowly, from unbearable to bearable, until most days were good enough that I wanted to live. What had changed? Not the world, but my perception of it and myself.

My one constant prayer had been, make me well that I might help others. Give me strength, for them, knowing well the pitfalls they would face, so that I can smooth the path. Now there are a different set of circumstances to conquer, but with God in my corner it will always be better and therein lies my strength. Giving in or up is not an option. Gabrielle has yet to blow his golden horn, therefore my purpose for being - adequate or inadequate - remains. If you find yourself being upset so that your children are hurt - talk to them. I once wrote to mine...

A MOTHER'S PRAYER FOR HER SON

I hope you know I love you, though at times I know you wonder
 Why I say the things I do, as repeatedly I blunder
 While trying to reach out to you, to guide and to direct you,
 I utter some distasteful things, thus leaving you no wiser -
 So whatever I accomplish with my too few pearls of wisdom
 Are lost, when I reiterate some things I cannot fathom.
 Forgive the error of my ways, I know some harm was done
 But I pray to God sincerely that His Direction be the one
 You listen and adhere to, for I am only here awhile,
 But He is there forever to teach you how to love and smile-
 So speak to Him the way in which you would a Special Friend,
 Share with him your burdens, they'll be lighter and He'll bend
 Like a gracious weeping willow, with his many arms to hold you
 While gently you'll be nurtured with his Love, that will enfold you-
 For He made you in His likeness, so to Him you should be true,
 Not bound by all the man-made laws, - just His The Golden Rule!
 "Do Unto Others As You Would Have Them Do Unto You."

DENTAL ALLERGIES

Lilian Elcomb

Upon visiting your dentist, advise him of any allergies you think you have; for example: penecillin as you may need treatment for an infection. If you have noted any allergic reaction to nickel in your jewellery, it could also be that you are having reactions to fillings in your teeth, dentures, braces, crowns and caps.

Some local anesthetics may be preserved with sodium bisulfite, used by restaurants to keep the salads fresh looking. It is banned in the U.S.A. for this use as the findings have been conclusive that it causes severe reactions to some people.

Canada is slowly following. McDonald's and Wendy's are not using sulphatēs anymore.

Many people have had their fillings changed by dentists in the field of natural medicine and have been surprised at the results and the feeling of well being it produced.

SUNNY HILL RESEARCH CENTRE

Reproduced from:

Winter 1987 Newsletter

Sunny Hill will
open for full
service to
environmentally-
sensitive
individuals this
year.

Sunnyhill will
operate as an
educational
institution. A
full array of
courses, personal
counselling,
telephone
consultation and
educational

materials, all designed to help environmentally sensitive individuals cope with life and return themselves to health.

Live in courses will be offered up to a month long, for those whose doctors have prescribed a special clean environment. During this period, information, support, education and full access to scientific and medical information from their library and research network will be available.

Telephone Counselling

Starting January 1987, appointments may be made to Bruce and Barbara Small for telephone counselling. All conversations will be treated as fully confidential. Counselling must be booked in advance and will be subject to an hourly charge plus telephone costs, if any. When booking, state briefly the kind of discussion you would like and the time most convenient for you.

Also, for investment update in Sunnyhill contact:

R.R. #1, Goodwood, Ontario L0C 1A0

Bus - (416) 294-3531 Res - (416) 649-3511

SATURDAY, MARCH 7 - \$20

ROYAL YORK HOTEL

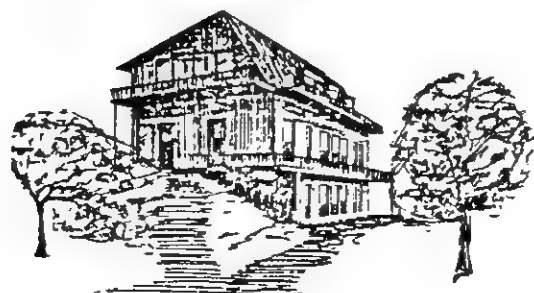
CHOC 108 WILLOWDALE, TORONTO

TOTAL HEALTH '87

**VITAL INFORMATION AND WORDS OF WISDOM
FROM INTERNATIONALLY KNOWN AUTHORITIES
TO HELP PREVENT OR OVERCOME ILLNESS**

ADVANCE TICKETS ARE \$18 AT CHOC OFFICE

OR THROUGH BASS AGENCY; \$20 AT THE DOOR





A.G.E.S. PAMPHLETS



The following pamphlets are now available from Head Office - see address on front cover.

List of A.G.E.S. Pamphlets

Price
(includes postage
and handling)

___ FOUR DAY ROTARY DIET 1)Rotation 2)Food Families 3)Corn & Milk Products by Marie Laurin, B.A., M.Sc.Ed	\$2.00
___ HOUSE CLEANING OF CHEMICALS	\$.90
___ ENVIRONMENTALLY ILL & THEIR HOME	\$1.00
___ WHAT ABOUT AIR POLLUTION IN MY HOME	\$.65
___ HYPERSENSITIVITY & LEARNING DISABILITY	\$1.25
___ CANDIDA ALBICANS & (List of Fungus Producers)	\$1.50
___ PESTICIDES AND HERBICIDES	\$1.50
___ SULPHITES & THEIR EFFECTS	\$.50
___ THE EFFECT OF INDOOR AIR QUALITY	\$1.25
___ SCHOOL BOARDS INTRODUCTION TO HYPERSENSITIVITY	\$2.00
___ COPING WITH THE ALLERGIC & HYPERSENSITIVE CHILD by H. Holden	\$1.25
___ ON SURVIVING WITHOUT WHEAT by J. Anderson	\$1.25

MEMBERS CORRESPONDENCE CORNER

Dear Ages,

I just wanted to let you know that I suffer from "Environmental Hypersensitivity Disorder" and that with the help of my clinical ecologist, I have begun to receive my C.P.P.(disability) cheques.

Take heart, fellow members!!

Yours
Carol Wylie
Kitchener, Ontario.

ENVIRONMENTAL HEALTH

CHEMICAL DISABILITY \$45.
or \$50. after
March 15/87

Second Annual Conference of the Ecology Foundation of Canada

8:30-8:45	Opening Remarks & Welcome
9:00-9:45	Dr. ARISTO MOJIDANI The relationship of Candida & Chemicals in the Immune System
9:40-10:20	PROFESSOR TRAINOR The Influence & Health Effects on Electromagnetic Fields
10:20-10:50	BREAK
10:50-11:10	Dr. ROSS HUME-HALL Nutrition in Degenerative Diseases
11:10-11:30	Dr. CATHERINE DAVIES Chemical Residues in Supermarkets
11:30-12:00	Panel Discussion
12:00	LUNCH
12:45-1:45	ANNUAL GENERAL MEETING
1:45-2:05	Dr. WILLIAM REA Pesticides, Herbicides & other Chemicals Related to Chronic Human Disease
3:00-3:20	BREAK
3:20-4:00	BRUCE SMALL Practical Measures for Control of Indoor Air Pollution
4:00-4:30	Dr. VIRGINIA SALARES Practical Method for Water Treatment in the Home

Cheques payable: H.E.F. 97 Village Green
Kanata, Ontario K2L 1J8

Enclose fee payable to:
The Canadian Society for Clinical Ecology
Conference - 97 Village Green,
Kanata, Ontario, K2L 1J8

Registration Fee: \$200.00 (\$225.00 after
March 15, 1987)

PROPOSED PROGRAM FOR 1987 MEDICAL CONFERENCE

FRIDAY, APRIL 3, 1987

Moderator Dr. Lyn Marshall

8:30 - 8:45	Opening Remarks and Welcome by Dr. John MacLennan
8:45 - 9:30	Outline and Purpose of the Conference
9:30 - 10:00	Minister of the Environment - Mr. James Bradley Theme - The Relationship of Our Toxic Environment to Human Health - Dr. Ross Hall Break
10:00 - 10:30	Dr. Stuart Hill Effects of Soil Conditions on Food Quality
10:30 - 11:00	Comparative Soil Analysis Chemical versus Organic Production of Food
11:00 - 11:30	Dr. Catherine Davies Chemical Residues in Supermarket Foods
11:30 - 12:00	Question and Answer, and Summary by Chairman
12:00 - 1:00	LUNCH
1:30 - 2:00	Moderator Dr. William Rea Dr. Aristo Mojidani The Immunology Related to Chemical Susceptibility
2:00 - 3:30	Water Panel - 20 minute presentations Dr. John Laseter Chemical Analysis of Common Contaminants Correlation of Blood Analysis and Clinical Manifestations Dr. Catherine Davies Studies re Lake Ontario, and Toronto Water Supply Dr. Richard Thomas, National Research Institute Acid Rain and Other Airborne Contaminants Groundwater Contamination Dr. William Rea Double Blind Water Studies Break
3:30 - 4:00	Dr. Virginia Salares Practical Methods for Water Treatment in the Home

PROPOSED PROGRAM FOR 1987 MEDICAL CONFERENCE

FRIDAY, APRIL 3, 1987

4:30 - 5:00	Question and Answer and Summary
5:30 - 6:00	Annual Business Meeting
7:00 - 7:30	Cocktails
7:30	Banquet

SATURDAY, APRIL 4, 1987

Moderator Dr. John Molot

8:30 - 9:00	Dr. Napke Relationship of Drug Sensitivities to Human Health
9:00 - 9:30	Present State of the Art in Indoor Air Pollution Dr. Walkinshaw (N.R.C.) Practical Measurements Hazards of Indoor Air Pollution - Domestic, Commercial Bruce Small Practical Measures for Control - Indoor Air Pollution Break
10:00 - 10:30	Dr. J. Laseter Laboratory Investigation of Chronic Health Problems
10:30 - 11:00	Dr. Wm. Rea Pesticides, Herbicides and Other Chemicals Related to Chronic Human Disease
11:00 - 11:30	Question and Answer and Summary LUNCH
1:30 - 2:00	Moderator Dr. Joseph Krop Dr. Trainor The Influence and Health Effects of Electromagnetic Fields
2:00 - 2:30	Dr. Lyn Marshall Management of the Multisystem Patient and the Family Break
2:30 - 3:00	Dr. Ross Hall Nutrition in Degenerative Diseases
3:00 - 3:30	Dr. J. Main - Case Report
3:30 - 3:40	Dr. J. Krop Corrective Measures for Patients with Chemical Maladaptations
3:40 - 4:10	Dr. S. Hill The Quality of Life - A Philosophical View
4:10 - 4:30	Question and Answer Dr. William Rea - Summary of the Conference

PROBLEMS WITH POLYESTER?

According to Corporate & Consumer Affairs, even if clothing label says 100% cotton, the thread may still be polyester and usually is!

But Harvey Woods Ltd. is willing to make up a special large order of women's underpants with cotton thread only! The elastic at the waist is in a tunnel of the cotton material so it does not touch the skin. The knitted ribbing at the legs (like the neckband of a 'T' shirt) has no elastic. These will be in white only sizes M, L, and XL.

I wear medium though I am size 10 because it allows for shrinkage in the dryer. Harvey Woods will do three sizes only.

Harvey Woods will only sell them at the regular retail cost of \$4.50 per pair. They have extra costs to rethread the machines. Although co-operative, I don't think they will do this oftener than once a year.

Please order by the dozen only. Otherwise my postage and packaging and costs will be more. I am only trying to break even.

Orders will be \$60.00 per dozen including tax, postage and packaging.

Please sent certified cheque or money order with your order to:

Mrs. Joan Woolsey
558 Briar Hill Avenue
Toronto, Ontario
M5N 1M9 phone (416) 488-5313

The order will go to Harvey Woods with payment on March 16, 1987.

ACID & ALKALINE GENERATING FOOD

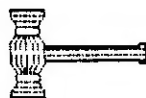
Rate your foods accordingly to better balance your body. This might involve some study of your individual needs.

Acid

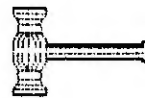
<u>1. Low</u>	<u>2. Medium</u>	<u>3. High</u>	<u>Very High</u>
barley bread whole wheat bread cottage cheese canned fruit + nuts pork, bacon (fat) cereal +	dried bananas beef white bread cheddar cheese corn fish ++ ham (fresh-lean) peanuts plums pork, bacon (lean) rice (natural) turkey whole wheat cereal ++	beans (cooked) beef liver chicken halibut filets lamb oats (cooked) salmon veal cereal +++	eggs lobster oysters cereal +++

Alkaline Base

<u>1. Low</u>	<u>2. Medium</u>	<u>3. High</u>	<u>4. Very High</u>
unsalted peanuts fresh green peas	apples (dried) asparagus bananas berries ++ cherries dates grapes/juice whole milk onions pumpkin/gourd turnip	berries +++ apricots beans/lima/fresh cabbages cauliflower fruits(almost all) lemon (natural) orange (natural) peaches pears pineapples potatoes radishes rhubarb tomatoes (canned) watermelon	berries ++++ apricots (dried) beets (fresh) carrots celery cucumber figs (dried) lettuce spinach tomatoes (fresh)



ANNUAL MEETING



The third (3rd) Annual Meeting of A.G.E.S., The Advocacy Group for the Environmentally Sensitive will elect it's new slate of officers for it's Board of Directors on March 28, 1987 in Burlington.

Find enclosed a nomination sheet to be returned by March 20th, 1987. Be sure to find a seconder and a person to nominate someone you would like to see on your Board of Governors.

The following positions are now open for office:

President, Vice President, Treasurer, Correspondence Secretary, Recording Secretary, Trustees, Newsletter Editor, Mailing, Librarian, Advocacy Chairperson, Committee Chairpersons.

No organization can be successful without the support of it's members in their performance of Board of Director's Functions.

Thanking you in advance for your participation re. the leadership role of this group.

Every Canadian Member is invited to act on A.G.E.S. Board of Governors. Meetings are about 3 to 4 times a year including the Annual Meeting.

If you have any changes to the Constitution, one must have the support of two members to bring it to the assembly. Send them by mail prior to the meeting.

We are very anxious to see you in large numbers at the Annual Meeting.

NOMINATION FORM

I _____, a member in good standing of A.G.E.S. would like to nominate _____ as a member of the Board of Governors - or - I would be willing to serve as an officer according to the Constitutions & By-laws of 86.04.19

Proposer: _____

Secunder: _____

Your Board of Governor's